

## Suicide Surveillance in RPMS

Suicide, especially among youth and young adults, is a serious public health concern in American Indian/Alaska Native (AI/AN) communities. The CDC reports that 2004 suicide rates were highest among whites and second highest among AI/AN men, and Native Americans have the highest rate of suicide in the 15-24 age group. Surveillance, data collection and data analysis are integral components of a comprehensive community or public health agency response to suicide.

In support of Agency healthcare IT initiatives and GPRA clinical performance measures, the suicide surveillance tool is available RPMS-wide in PCC, PCC+, the RPMS Electronic Health Record and the RPMS Behavioral Health System. The suicide surveillance tool allows clinicians to document incidents of suicide, including ideations with intent and plan, attempts and completions. It captures data related to a specific incident of suicide, such as date and location of act, method, contributing factors and other useful epidemiological information. With the expansion of suicide data collection to the primary and emergency care settings, IHS will have more comprehensive and reliable information about these occurrences. The data will be used to better understand the prevalence of suicide in the populations served by I/T/U healthcare facilities and to inform intervention and prevention activities.

### Suicide Reporting Form

#### Data Elements

##### General and Demographic

- Name
- Reporting Provider
- Date of Act
- Community
- Relationship Status
- Employment Status
- Education

##### Description and Disposition

- Self Destructive Act
- Location of Act
- Previous Attempts
- Lethality
- Method
- Substance Use
- Contributing Factors
- Disposition & Narrative

**Suicide Reporting Form - ADD**

Demo, Female A | F | DOB 8/10/1976 | Age 30 | HRN 21334 | SSN 333-22-5555

Local Case Number: [ ] | Provider: USER.DEMO [ ]

Date of Act: 5/31/2006 [ ] | Community Where Act Occurred: TUCSON [ ]

Relationship Status: SINGLE [ ] | Education Level: COLLEGE GRADUATE [ ]

Employment Status: PART-TIME [ ]

Self Destructive Act: ATTEMPT [ ] | Previous Attempts: 1 [ ]

Location of Act: HOME OR VICINITY [ ]

Lethality: MEDIUM [ ]

Disposition: MENTAL HEALTH FOLLOW-UP [ ]

Method | Substance Use | Contributing Factor(s) | Narrative

☐ Gunshot | ☐ Carbon Monoxide

☐ Hanging | ☒ Overdose

☐ Motor Vehicle | ☐ Unknown

☐ Jumping | ☐ Other:

☐ Stabbing/Laceration

Overdosed Using

Substance Name

ACETAMINOPHEN (E.G. TYLENOL)

ALCOHOL

Add | Edit | Delete | Clear

Print | Close | Save

Most patients with serious suicidal ideation or attempts present first to providers in primary or emergency care. The availability of the RPMS suicide surveillance tool for all providers in I/T/U healthcare settings will promote standardized and systematic documentation of suicide events. Suicide data can be analyzed locally through RPMS reports and is exported nationally, so that we can develop a better understanding of this important public health problem. For more information, please contact Denise Grenier at [Denise.Grenier@ihs.gov](mailto:Denise.Grenier@ihs.gov).

*Suicide Surveillance Tool in RPMS EHR*